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# TRANSMITTAL FORM

Application Serial Number	10/801,064
Filing Date	March 15, 2004
First Named Inventor	Cao
Group Art Unit	2857
Examiner Name	Raymond, E.
Attorney Docket No.	IBX-009
Patent No.	Not applicable
Issue Date	Not applicable

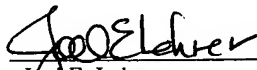
## ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Check Attached <input type="checkbox"/> Copy of Fee Transmittal Form <input checked="" type="checkbox"/> Amendment/Response <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____] <input type="checkbox"/> Petition for Extension of Time <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Form PTO-1449 <input type="checkbox"/> Copies of IDS Citations <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Sequence Listing submission <input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application <input type="checkbox"/> Formal Drawing(s) <input type="checkbox"/> Request For Continued Examination (RCE) Transmittal <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers) <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> CD(s) for large table or computer program <input type="checkbox"/> Amendment After Allowance <input type="checkbox"/> Request for Certificate of Correction <input type="checkbox"/> Certificate of Correction (in duplicate)	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences <input type="checkbox"/> Appeal Brief (in triplicate) <input type="checkbox"/> Status Inquiry <input checked="" type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8 <input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8 <input type="checkbox"/> Additional Enclosure(s) (please identify below)
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**PATENT**  
Attorney Docket No. IBX-009

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

APPLICANTS:	Cao, <i>et al.</i>	CONFIRM NO:	1242
SERIAL NO.:	10/801,064	GROUP NO.:	2857
FILING DATE:	March 15, 2004	EXAMINER:	Raymond, E.
TITLE:	INTELLIGENT MODELLING OF PROCESS AND TOOL HEALTH		

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**AMENDMENT AND RESPONSE**

Sir:

This paper is submitted in connection with the above-identified patent application, in response to the Office Action mailed from the U.S. Patent and Trademark Office on June 30, 2005.

Applicants respectfully request entry of this Amendment and Response. In the event that any extension or additional fees are due to have this Amendment and Response entered and considered, this is a conditional petition for such extension, and the Commissioner is hereby authorized to charge any such fees to Deposit Account No. 07-1700. Please amend the above-identified application, without prejudice, as follows:

**Amendments to the Claims** begin on page 2 of this paper.

**Remarks** begin on page 5 of this paper.